. 1		YAG	
FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	STATEMENT
CHECK ONE:		DR-1	OF
This is an initial Statement of Organization	CCCC CARTER	(Rev. 10/2009)	ORGANIZATION
This is an amended Statement of Organization	A THE REAL PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN CO	For Office Use O	11572
* Statement must be filed within 10 days of committee accepting contribution incurring debts exceeding \$750. Amendments must be filed within 30 days of	is, maxing expenditures, or of a change.	Comm.#	<u> </u>
Effective January 1, 2010, all statements and reports filed by new committee	a for state office must be filed	Audited	
electronically and effective January 1, 2012, all statements and reports filed	by all committees for state office	Computer	
must be filed electronically. Effective May 1.2010, all statements and reports for State PACs and State Is	Parties must be filed electronically.		
COMMITTEE NAME 🔱 (A candidate's committee must include the candidate's last name in the name of the committee.) If amending committee name,			
put old name in ().			
VOTE YES FUR THE LIBRARY			
iMPORTANT: Indicate type of committee you are reporting for: 1/1 (1) Statewide PAC (3) State Party (4) County Central Committee			
(8 VCcumby Candidate (6 VCity Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC			
(10)School Board or Other Political Subdivision PAC (11) Ballot lasse (including committee involved in multiple city/county ballot issues)			
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mand	ziory except for a ca	ndidate's committee)
Name + + Bruce Baiowin	Name + F. VEE /	Muhaoz	
Melling Address I. I.	Malifor Address J. J.	1 74 01-22	
Mailing Address + 1304 JOHNSON DRIVE	Mailing Address 11 4c5		
City. State 1 Zip Code 1 1 57 601	City, State J. J. Zip Code J. J. HENAN DORY!	1A 516	of
Phone (7(2) 246-2248	Phone (7(2) 246 -	3830	
e-Mail bt baldwin 4 @ msn. com	e-Man evm 51601	@ msn.	com
INDICATE PURPOSE OF COMMITTEE - Check One Box Adv. Comment or description:		dvocate for bailot issu dvocate against ballot	
All Candidates Enter:	County/Local Candidates a		
Office Sougit:	County: PASE		
Political Party (If applicable)	(if active in multiple ballot less	vo electione ettech lie	A of any office
District: Date of Election: 8 - 7 - 10			
	•		t of counties
Year Standing for Election:	Date of Election:	7-10	
	Date of Election: 8	7-10	
Year Standing for Election: Bank Account Name (must match committee name)	Date of Election: 8	arent Entity (PACs.)	
Year Standing for Election: Bank Account Name (must match committee name) Vote Ves for the Library Name of Financial institution/type of Account	Date of Election: 8	arent Entity (PACs.)	
Year Standing for Election: Bank Account Name (must match committee name) Vote Ves for the Library Name of Financial institution/type of Account	Candidate name & Address or F	arent Entity (PACs.)	
Year Standing for Election: Bank Account Name (must match committee name) Vote Ves for the Library Name of Financial institution/type of Account the Chy Name Pai Bank Leheck ag Malling Address Laborated the Check ag	Date of Election: 8 Candidate name & Address or F Mailing Address Mailing Address	2 ~ / 0 Parent Entity (PACs.) Affiliate, or Sponsor	applicable).
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